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MH Redesign Consultants Selected

DES MOINES, Iowa – A national nonprofit consultant specializing in developing mental health programs for vulnerable low-income people has been retained to assist the Iowa Department of Human Services in recommending a redesign of Iowa's mental health system.

DHS Director Chuck Palmer said the Technical Assistance Collaborative Inc., of Boston, Mass., will provide expertise to each of the workgroups that have been appointed to study various parts of Iowa's system.

Legislation approved this year dismantles Iowa's current system that has been criticized for being inequitable. The legislation requires the DHS to hammer out details of a new system with several objections, including creation of a core set of services for anyone eligible for government mental health services, and reorganizing the adult disability service into a system administered on a regional basis.

Workgroups with various purposes were appointed last week. Their meeting schedules will be intense for the next two months, with a draft report due at the end of October.

TAC's team will be led by Executive Director Steve L. Day. TAC has subcontracted with the Human Services Research Institute of Cambridge, Mass., to provide additional expertise.

Here is information about the consultants:

Stephen L. Day, M.S.W., Executive Director, Technical Assistance Collaborative, Inc.

Steve Day is co-founder and Executive Director of TAC. Over the past 19 years, Steve has provided consultation to over 100 state and local jurisdictions, plus numerous national policy and advocacy organizations. The results of these consultations include comprehensive analyses of public mental health and human services systems, multi-year strategic plans, service system improvement and financing strategies, outcome and performance measurement systems, and organizational and human resource development plans. Prior to joining TAC, Steve was Deputy Commissioner of the Massachusetts Department of Mental Health for seven years. At TAC, Steve has worked directly on state level service planning, implementation and financing initiatives in Arizona, Connecticut, Delaware, the District of Columbia, Georgia, Florida, Hawaii, Iowa, Louisiana, Maine, Maryland, Massachusetts, Missouri, Montana, New Hampshire, New Mexico, North Carolina, Ohio, Oregon, Oklahoma, South Carolina, Texas, and Washington. Steve was among the senior consultants providing technical input and support to the President's New Freedom Commission on Mental Health, authoring a technical monograph on Medicaid's role in public mental health services, and assisting to

draft recommendations related to state-level mental health system master planning and on linking mainstream service resources to supportive housing for people with mental illness.

Kevin Martone, LSW, Director for Behavioral Health

Kevin Martone has nearly 20 years of experience in executive level leadership at the national, state government and non-profit human services levels with expertise in public mental health administration. Much of his work has focused on implementing the Olmstead decision, advancing recovery, community integration and social inclusion particularly through the use of permanent supportive housing, service coordination and other evidence-based practices. He has knowledge of complex systems, including healthcare, social services/welfare, community development, public health, criminal justice and their intersection with the political environment. As Deputy Commissioner over mental health and substance abuse in New Jersey, he managed a \$1.5 billion operating budget and advanced statewide systemic transformation of the public behavioral health system. Results include the significant downsizing of the state psychiatric hospital system, expansion of outcome-oriented community services, despite the recession, and design and implementation of administrative merger of divisions of mental health and addictions, including service integration at the provider level. As President for the National Association of State Mental Health Program Directors, he advanced key policy issues on behalf of the nation's public mental health systems before Congress, federal agencies, including CMS, HUD and SAMHSA, and other stakeholder groups.

Kappy Madenwald

Kappy Madenwald is an independent consultant with extensive experience providing consultation to states, counties and community treatment providers in building competency-rich and multifaceted behavioral health service systems and offers unique expertise in the evaluation, implementation and/or operation of community-based models of crisis intervention that result in creating close-to-home, recovery-oriented and less restrictive alternatives to inpatient hospitalization or residential treatment. Through the development of thoughtful and efficient Crisis Systems of Care, communities and states can reduce clinical risk, serve people in the community and reduce over-reliance on facility-based care. Previous and ongoing projects include an array of consultation services in Massachusetts, Georgia, California, North Carolina, Oregon, Iowa, Pennsylvania, New Mexico and Maryland working with state or regional governmental agencies and non-profit agencies. A graduate of The Ohio State University College of Social Work, Kappy is a Licensed Independent Social Worker in the State of Ohio with 24 years of professional experience in the field of behavioral healthcare. Previously the Director of Clinical Services at Netcare Corporation, the primary provider of mental health, alcohol and other drug crisis and assessment services in Columbus, Ohio, Kappy has extensive on the ground experience in mobile and site-based crisis program service delivery and competency development.

Valerie J. Bradley, M.A., President, HSRI

Ms. Bradley has been the President of the Human Services Research Institute since its inception in 1976. She has a Master's Degree from the Eagleton Institute of Politics at Rutgers University. Since 2001, Ms. Bradley has provided consultation to numerous states and to the Centers for Medicare and Medicaid Services (CMS) Regional Offices with the National Quality Improvement Contract for HCBS. Over the past 3 decades she has directed numerous state and federal level policy evaluations that have contributed to the expansion, enhancement and responsiveness of services and supports to people with disabilities and their families. She helped to design skills standards for human services workers, conducted a study to translate the experience with decentralization in Scandinavia to an American context, has directed a national evaluation of self-determination, and co-directed a national project on performance measurement. Ms. Bradley has published extensively over the course of her career and most recently co-edited books titled *Creating Individual Supports for People with Developmental Disabilities* and *Quality Enhancement in Developmental Disabilities*. Ms. Bradley is the past Chair of the President's Committee on Mental Retardation and a recent past President of the American Association on Intellectual and Developmental Disabilities (AAIDD) formerly the American Association on Mental Retardation.

Elizabeth Pell, MSW, LICSW

Elizabeth Pell is a Policy Analyst at HSRI who has worked in the advocacy field on behalf of persons with psychiatric and physical disabilities for over 25 years. At HSRI, she has coordinated national and state program evaluations and provides technical assistance to states to enhance quality management activities -- with particular focus on developing quality councils including individuals receiving services and family members, state mortality review, service planning, incident management, provider monitoring, and implementing systems change initiatives. Ms. Pell's experience prior to HSRI has informed her policy and statistical analysis. She worked to protect individual's rights as a Legal Advocate for persons with developmental and psychiatric disabilities with the federal Protection and Advocacy systems in Alabama and Massachusetts and with the federal court overseeing implementation of a settlement agreement about treatment. She gained experience in home care and protective services as Director of an Elder Abuse and Protection department in a Massachusetts home care agency, and learned long term care systems as Director of Social Services with a hospice agency in Oregon, as a social worker in a psychiatric institution, and as an aid in a nursing home.

Technical Assistance Collaborative, Inc.

The Technical Assistance Collaborative, Inc. (TAC) is a 501(c)(3) non-profit corporation formed in 1992. TAC is nationally recognized for its expertise in the development, management and financing of best practice services in the fields of mental health, substance abuse, child and family services, affordable supportive housing and homelessness. TAC specializes in assisting states to design and implement integrated systems of care for priority consumers within the context of each state's organizational, administrative and financial resources. TAC has provided direct technical assistance to state behavioral health, human services and/or Medicaid authorities in 33 states. In addition, TAC

has provided technical assistance and training to over 150 county or other local public authorities and non-profit provider organizations in a total of 49 states and territories.

TAC is unique in its knowledge of and experience with working with state and county governments. We understand both the opportunities and the constraints of working within public systems at the state level. We know that every state is different, but also that states can learn much from each other. We are experienced in facilitating communication and consensus-building among disparate state entities that frequently have competing priorities and imperatives. We understand the importance to public mental health systems of Governors' offices, state budget and administrative staff, Legislators and legislative staff, and Medicaid officials in addition to the public mental health authorities. We appreciate and are committed to the parallel public missions of providing high quality best practice services to priority consumers while at the same time assuring accountability for and stewardship of scarce public resources.

Human Services Research Institute, Inc.

The Human Services Research Institute (HSRI), a non-profit organization, was established in 1976. Since that time, HSRI has been associated with some of the major trends and reforms in the fields of developmental disabilities, behavioral health and child welfare. HSRI's work has included:

- Assisting human service organizations and systems to develop support systems for children, adults, and families;
- Enhancing the participation of individuals and their families to shape policy and service practices;
- Improving the capacity of systems, organizations, and individuals to cope with the changes in fiscal, administrative, and political realities;
- Expanding the use of research and evaluation to guide policy and practice.

HSRI has provided policy analysis, evaluation and research to a variety of public agencies including the Administration on Developmental Disabilities, the Center for Mental Health Services, the Center for Substance Abuse Prevention, the Assistant Secretary for Planning and Evaluation (DHHS), the Department of Education, the Centers for Medicare and Medicaid Services, and to virtually every state in the country.

The Institute's mission continues to focus on improving the lives of people with disabilities. Through the National Core Indicators (26 participating states) HSRI is exploring the application of national performance standards. As a resource for technical assistance in family support, the Institute is assisting in the dissemination of best practices. As a continuing technical assistance center for evaluation of systems change in mental health, the Institute is leading the way in the application of practical strategies to assess and improve services and supports to persons with mental illness. As publisher of *The Riot*, the Institute has partnered with self-advocates around the country to support their voice and point of view. As a national resource for technical assistance in quality assurance, the Institute is assisting states to improve the way they ensure the well-being of people with intellectual and other developmental disabilities.

